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| CLAIMS ONLY | SERIAL NO. | FILING DATE |
| | APPLICANT(S) | |

| CLAIMS | | | | | | |
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| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
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| TOTAL IND. | 17 | | | | | |
| TOTAL DEP. | 33 | | | | | |
| TOTAL CLAIMS | 50 | | | | | |

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| TOTAL CLAIMS | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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